

PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

16

|                        |                  |
|------------------------|------------------|
| Application Number     | 09/954,685       |
| Filing Date            | 09/11/2001       |
| First Named Inventor   | Alec A. Ciolac   |
| Art Unit               | 2676             |
| Examiner Name          | Allen E. Quillen |
| Attorney Docket Number | 1376.0100720     |

## ENCLOSURES (Check all that apply)

|  |   |  |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form                                | <input type="checkbox"/> Drawing(s)                                       | <input type="checkbox"/> After Allowance communication to Group                            |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Licensing-related Papers                         | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input checked="" type="checkbox"/> Amendment/Reply                          | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation                    | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Change of Correspondence Address                 | <input type="checkbox"/> Other Enclosure(s) (please identify below):                       |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Terminal Disclaimer                              |  |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> Request for Refund                               |  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> CD, Number of CD(s) _____                        |  |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application   | <input type="checkbox"/> Remarks  |  |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |  |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                         |                                |
|-------------------------|--------------------------------|
| Firm or Individual name | Rita M. Wisor, Reg. No. 41,382 |
| Signature               | <i>Rita M. Wisor</i>           |
| Date                    | Sept. 4, 2003                  |

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

|                       |                      |             |
|-----------------------|----------------------|-------------|
| Typed or printed name | Katrina Prati        |             |
| Signature             | <i>Katrina Prati</i> | Date 9-4-03 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

■ TOLER  
■ LARSON  
& ABEL

**FACSIMILE COVER SHEET**

RECEIVED  
CENTRAL FAX CENTER

NOV 07 2003

**DATE:** November 7, 2003

**TO:** Examiner Allen E. Quillen      **FAX NO.:** 703-872-9306  
USPTO GPAU 2676

**FROM:** Rita M. Wisor

**RE U.S. App. No.:** 09/954,685, filed 09/11/2001

**Applicant(s):** Alec A. Ciolac

**Atty Dkt No.:** 1376.0100720

**Title:** SYSTEM FOR PROVIDING MULTIPLE DISPLAY SUPPORT AND  
METHOD THEREOF

**NO. OF PAGES (including Cover Sheet):** 17

**MESSAGE:**

AT EXAMINER QUILLEN'S REQUEST, PLEASE DELIVER THIS  
RESPONSE TO HIM AS SOON AS POSSIBLE

Attached please find:

- Copy of Transmittal Form (1 pg)
- Copy of Response to Office Action filed 9/4/03 (15 pgs)

5000 Plaza On The Lake  
Suite 265  
AUSTIN, TEXAS 78746  
  
Tel: (512) 327-5515  
Fax: (512) 327-5452  
www.tla-law.com

**CONFIDENTIALITY NOTE**

*The pages accompanying this facsimile transmission contain information from the law office of Toler, Larson & Abel, L.L.P. and are confidential and privileged. The information is intended to be used by the individual(s) or entity(ies) named on this cover sheet only. If you are not the intended recipient be aware that reading, disclosing, copying, distribution or use of the contents of this transmission is prohibited. Please notify us immediately if you have received this transmission in error at the number listed above and return the document to us via regular mail.*

■ TOLER  
■ LARSON  
■ & ABEL, L.P.

5/B  
11/13/03

(NR)

## FACSIMILE COVER SHEET

**DATE:** November 7, 2003

**TO:** Examiner Allen E. Quillen      **FAX NO.:** 703-746-7194  
USPTO GPAU 2676

**FROM:** Rita M. Wisor

**RE U.S. App. No.:** 09/954,685, filed 09/11/2001

**Applicant(s):** Alec A. Ciolac

**Atty Dkt No.:** 1376.0100720

**Title:** SYSTEM FOR PROVIDING MULTIPLE DISPLAY SUPPORT AND  
METHOD THEREOF

**NO. OF PAGES (including Cover Sheet):** 2

### MESSAGE:

Attached please find:

Response to Office Action, p. 5 (1 pg)

5000 Plaza On The Lake  
Suite 265  
AUSTIN, TEXAS 78746

Tel: (512) 327-5515  
Fax: (512) 327-5452  
www.tla-law.com

### CONFIDENTIALITY NOTE

The pages accompanying this facsimile transmission contain information from the law office of Toler, Larson & Abel, L.L.P. and are confidential and privileged. The information is intended to be used by the individual(s) or entity(ies) named on this cover sheet only. If you are not the intended recipient be aware that reading, disclosing, copying, distribution or use of the contents of this transmission is prohibited. Please notify us immediately if you have received this transmission in error at the number listed above and return the document to us via regular mail.